Effective October 1, 2003 10789346													
. CLAIMS AS FILED - PART I (Column 1) (Column 2)									SHALL ENTITY OTHER THAN TYPE OR SHALL ENTIT				
TOTAL CLASS			14					PATE	FEE	7	RATE	FEE	
FOR			MUMBER FLED		NUMBER EXTRA		1	BASE F	385.00	OR	BASIC FE	770.00	
TOTAL CHARGEABLE CLAIMS			14 minus 20.		• 0			X\$ 8-		OR			
INDEPENDENT CLAIMS			2 in	2 intinus 3 =		. 4		X43=	1	OR			
	LATIPLE DEPE	NOENT CLARA F	RESENT					+145=		OR			
• II the difference in column 1 is less than zero, enter "O" in column 2						cotumn 2		TOTAL					
,	CLAIMS AS AMENDED - PART II										OTHER		
11	//- 29 45 (Column 1) (Column 2) (Column 3)							SMALI	DITTY	OA	SMALL	ENTITY	
ENTA	. •	CLAPIS REMAPTING AFTER AMERICMENT	•	REVIO PAID F	LEA USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Tistad	. 2	Minus	- 2	0	·0-		X5 90		OR	X\$18=		
¥	Independent	· 2	Menus		3	•		X43•		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							'	+145=		OR	+290a		
							L	TOTAL		~	TOTAL ADOIT FEE		
(Column 1) (Column 2) (Column 3)										•			
AMENDMENT B	A.10.66	CLAMS REMADENG AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	er USLY	PRESENT EXTRA		PATE	ADDI- TIONAC FEE		RATE	ADDI- TIONAL FEE	
	Total	. 2	Minus	• 5			ŀſ	X2 8-/		OR	X\$18a	٠.	
	Independent	· Z	Minus on 3 o ($\cdot \bigcirc$		X43-/	X	OR	X88=		
ــــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' ˈ	1450	/	OR	•290 •		
									· ·		YOUL		
MUM-COMP (Cohumn 1) (Cohumn 2) (Cohumn 3)												•	
akendment c	7.33.04	CLAIMS REMADUNG AFTER AMERICMENT	·	HIGHE NUMBI PREVIOU PAID FO	er Isly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 14	Minus	• 4	0	• 6	Γ	×2 ex		OR	X\$18=		
Ä	Independent	• <u>a</u>	Minus Titol C DES	- S.		• 0	1	X43 ₇		OR	X86-		
	- MAI PRESE	1	745=	7.	OR	+290-							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the Trighest House Provinces Park For DV THOS SPACE in less than 20, write "20."										T	7074		
	The Nighed Number Previously Paid For W Thos SPACE is less than 20, order 30. The Nighed Number Previously Paid For W Thos SPACE is less than 2, order 3. The Nighed Number Previously Paid For (Total or Independent) is the highest resulter found in the appropriate box in column 1.												
								·		• •			

Application or Docket Number